

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	1149		1-17-64
O.I.P.E. CLASSIFIER		8	3-30-00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	CG	109605	5-17-00

Best Available Copy

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral).... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final	Original
1	3-17-64
2	2-1-64
3	3-1-64
4	4-1-64
5	5-1-64
6	6-1-64
7	7-1-64
8	8-1-64
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
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